



U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE

DECLARATION

ATTORNEY'S DOCKET NO.
01662/63202

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled **MENTHOL SOLUTIONS OF DRUGS**, the specification of which was filed on **February 17, 2004** as U.S. Serial No. **10/781,543**.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

PRIOR UNITED STATES APPLICATION(S)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below.

APPLICATION NUMBER	FILING DATE (day, month, year)
60/449,246	20 February 2003

SEND CORRESPONDENCE, AND DIRECT TELEPHONE CALLS TO:

Steven J. Lee, Esq.
KENYON & KENYON
One Broadway
New York, New York 10004-1050

CUSTOMER NUMBER 26646

I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME FLASHNER-BARAK	FIRST GIVEN NAME Moshe	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Petach Tikva	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS Hefetz Mordechai 15	CITY Petach Tikva 49313	STATE & ZIP CODE/COUNTRY Israel
Signature		Date 4/5/04	
FULL NAME OF INVENTOR	FAMILY NAME LERNER	FIRST GIVEN NAME E.	SECOND GIVEN NAME Itzhak
RESIDENCE & CITIZENSHIP	CITY Petach Tikva	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS Wolfson 32	CITY Petach Tikva 49541	STATE & ZIP CODE/COUNTRY Israel
Signature		Date	
FULL NAME OF INVENTOR	FAMILY NAME ROSENBERGER	FIRST GIVEN NAME Vered	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Jerusalem	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 Miss Landau St.	CITY Jerusalem 96410	STATE & ZIP CODE/COUNTRY Israel
Signature		Date	

I declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

FULL NAME OF INVENTOR	FAMILY NAME FLASHNER-BARAK	FIRST GIVEN NAME Moshe	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Petach Tikva	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS Hefetz Mordechai 15	CITY Petach Tikva 49313	STATE & ZIP CODE/COUNTRY Israel
Signature		Date	
FULL NAME OF INVENTOR	FAMILY NAME LERNER	FIRST GIVEN NAME E.	SECOND GIVEN NAME Itzhak
RESIDENCE & CITIZENSHIP	CITY Petach Tikva	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS Wolfson 32	CITY Petach Tikva 49541	STATE & ZIP CODE/COUNTRY Israel
Signature		Date	
FULL NAME OF INVENTOR	FAMILY NAME ROSENBERGER	FIRST GIVEN NAME Vered	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY Jerusalem	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS 3 Miss Landau St.	CITY Jerusalem 96410	STATE & ZIP CODE/COUNTRY Israel
Signature		Date	

FULL NAME OF INVENTOR	FAMILY NAME MOLDAVSKI	FIRST GIVEN NAME Naomi	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY HaNegev	STATE OR FOREIGN COUNTRY Israel	COUNTRY OF CITIZENSHIP Israel
POST OFFICE ADDRESS	POST OFFICE ADDRESS Moshav Dekel D.N.	CITY HaNegev 85492	STATE & ZIP CODE/COUNTRY Israel
Signature 		Date <i>a - MAY - 2004</i>	

**APPOINTMENT OF POWER OF ATTORNEY
BY ASSIGNEE OF ENTIRE INTEREST**



Teva Pharmaceutical Industries Ltd., as assignee of the entire right, title, and interest in the application for patent entitled **MENTHOL SOLUTIONS OF DRUGS**, Serial No.10/781,543, filed February 17, 2004, does hereby appoint Charles R. Brainard (Reg. No. 21,069), Patrick J. Birde (Reg. No. 29,770), Steven J. Lee (Reg. No. 31,272), John B. Starr, Jr. (Reg. No. 44,474), Siu K. Lo (Reg. No. 46,877), Payam Moradian (Reg. No. 52,048), Craig L. Puckett (Reg. No. 43,023), Dana Ziker (Reg. No. 54,567), Neil M. McCarthy (Reg. No. 43,435), W. David Wallace (Reg. No. 42,210), Amy L. Hulina (Reg. No. 41,556) and Zeba Ali (Reg. No. 51,392) as its attorneys/agents with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Steven J. Lee, Esq.
KENYON & KENYON
One Broadway
New York, New York 10004-1050

CUSTOMER NUMBER 26646

Please direct all telephone calls to Steven J. Lee at (212) 425-7200.

TEVA PHARMACEUTICAL INDUSTRIES LTD.
5 Basel Street
P.O. Box 3190
Petah Tiqva 49131, Israel

Dated: 16 May, 2004

By: 
Name: Yehudah Livneh
Title: Director of Patents

Dated: May 4, 2004

By: 
Name: Uzi Karniel
Title: General Counsel and Corporate Secretary